

Applicant Certification

DUPLICATION OF BENEFITS INFORMATION: The SSBG Rental Assistance Program will provide grants of SSBG funds to eligible applicants to the RREM and LMI housing programs to defray interim rental costs while their home is under rehabilitation. These applicants are prohibited from receiving duplicative benefits under Section 312 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, (42 U.S.C. § 5155), including, in this instance concurrent rental assistance from other governmental or charitable programs as well as from insurance proceeds **in excess of total housing rental payments**. Before receiving any SSBG funds for rental assistance, applicants will be required to certify by affidavit that they understand and agree to this prohibition related to the grant of federal funds. Should a violation of 42 U.S.C. § 5155 come to our attention applicants will then be subject to a return of funds received.

I/We certify the following:

- I/We are United States citizens or qualified aliens.
- I/We, the applicant(s), acknowledge that this application shall be considered fraudulent if the applicant or co-applicant or entities acting at the direction of myself, (the applicant) or the co-applicant, with my/our knowledge or consent, are deemed to have given materially false, misleading or inaccurate information or statements and or failed to provide material information in connection with this application. NJHMFA reserves all rights to legal and equitable remedies against applicant.
- I/We certify that the address that was affected by Superstorm Sandy is my primary residence.

I/We also certify that:

- I/We are not currently receiving or expect to receive ANY other concurrent rental assistance from other government or charitable programs in excess of total housing rental payments.
- I/We have not been approved to receive rental assistance from the Tenant Based Rental Assistance Program (Sandy TBRA) which is implemented by the NJ Department of Community Affairs.
- I/We are not receiving insurance proceeds explicitly designated for housing rent payments.

Signature of Applicant

Date: _____

Print Name

Signature of Co-Applicant

Date: _____

Print Name